Working Group - Quality in Patient Care Brussels, Friday 19 April 2013

Present Dr Gerd Hofman Dr Vasilios Papalois Dr Rafaelle Gimglioti Dr Carmel Abela Dr Costantino Bianchi Dr Ole Norregaard Davide Martinelli

The Working Group on Quality in Patient Care met in Brussels on Friday 19 April and discussed the needs and expectations in individual doctors' practice to enhance quality managment. In this respect, the working group decided to offer some basic recommenda tions.

## 1. BONUS-Contracts:

For the sake of patient care, the private contract of medical doctors should not include s ome provisions especially those affecting purely economical targets which are in contra diction to medical guidelines and which can violate medical indications.

There should be a control mechanism in private hospitals as in public hospitals in order to ensure coherent, quality and safety of care for all patients irrespective of the place wh ere they receive treatement.

## 2. Press - induced medical indications

The progressive influence of press articles on medical indications becomes more and m ore problematic for the doctor-patient-relation. Therefore the press articles should be ver ified by appropriate consultation of medical experts and based on sufficient and serious professional medical advice.

## 3. Attitude in medical practice

It seems useful for the quality of patient care that peer visitation during practice gives a good overview of the attitude of the individual doctor applying his/her knowledge and s kills to the treatment of a patient. Technical and medical environment (nurses...) could b e included in the review in order to have a comprehensive view of the treatment provide d to patients.

## Report WG Quality in Patient Care Brussels, Oct.,18th

1) based in the outcome of last Meeting the WG decided to prepare a declaration against "Bonus-Contrac ts" for endorsement at the next Council-Meeting

2) after a intensive discussion about the importance of the attitude of a medical doctor as 3. part next to knowledge and skills in successful CPD it was decided to develope a questionnaire about: Does exist an a ssessment of attitude in your country, which procedure, information about details? For all delegates of th e Council, the sections and CESMA.

3) for the quality of pat.care the personality of the medical doctor is very important. Regarding the selec tion of persons for a medical study it should not be based solely on school-notes. It seems important to have additional a profile of features for a personal interview to decide, who would be a good medical student and later on doctor under respect of the diversity of the medical profession. This profile should also content negative features for exclusion of a person from medical profession. The WG is willing to work o n such a profile.

4) the Isernia Declaration on diet was discussed and positively accepted, only the "increased emphasis o n vegetarianism" was as too apodictic criticized

5) the importance of Patient Reported Outcome was discussed and an example of measures to realize thi s was presented.

Gerd Hofmann